OCCUPATIONAL THERAPY COMPETENCY DEVELOPMENT LEVELS

Levels of Evidence & Types of Evidence

<u>**GLOSSARY**</u>

OTCA: Occupational Therapy Competencies Australia (website)
OTPP: Occupational Therapy Practice Process
OTCEM: Occupational Therapy Competency Evidencing Matrix
Levels: The three Occupational Therapy Competency Development Levels:
- Emerging
- Consolidating
- Competent to Graduate

PRACSOT: Performance Record for the Australian Competency Standards for Occupational Therapists (PRACSOT),OTA, 2010

In Australia, because of national registration, students now have to meet the Australian Minimum Competency Standards for Graduating Occupational Therapists (2010). It is therefore an essential requirement that students can evidence that they are competent to graduate from their academic programs. This document aims to guide students in their collection of evidence as their competency progresses towards being Competent to Graduate.

INTRODUCTION

The following three **Occupational Therapy Competency Development Levels**:
- **Emerging**
- **Consolidating**
- **Competent to Graduate**

have been set as markers in a progression towards being "Competent to Graduate". These levels do not equate to years of study. The **Occupational Therapy Competency Evidencing Matrix (OTCEM) competency statements** recognise that some students may be working at different levels of competency for different **steps** of the **Occupational Therapy Practice Process (OTPP)** and their consequent practice reasoning. There are seven steps in the OTPP as follows: Step 1: Request for Service, Step 2: Information Gathering, Step 3: Occupational Assessment, Step 4: Identification of Issues, Step 5: Goal Setting, Step 6: Intervention or Step 7: Evaluation and a central section: Being A Professional. See further information about the OTPP on the otca.net.au website.

Not every OTCEM competency statement can be evidenced by documentary means.

TYPES OF EVIDENCE

There are two main types of evidence:

Observable Evidence (Observed Behaviours): These are the behaviours that the student has demonstrated during the practice placement that the Practice Educator has observed. The student self-assesses (ticks) the relevant OTCEM competency statements within the OTCA website that they have achieved.   The student's Practice Educator, academic or relevant other then verifies that they have observed this behaviour/s by agreeing or disagreeing with the student's self-assessed (ticked) competency statements on the OTCEM.

Documented Evidence: This is a description or hard/documented evidence that supports or demonstrates that the student's self-assessment. This type of evidence can be uploaded to "Your ePortfolio" in the OTCA website. This type of evidence is shown to the Practice Educator when they verify the student's self-assessed (ticked) OTCEM.

A Description: is a brief summary of a behaviour or action you took that demonstrates you achieved the competency statement/s at the given level.

Hard/Documented evidence: is a piece of evidence – see pages 5 & 6 of this document for a list of examples.

EVIDENCING YOUR COMPETENIES

As some competencies are **Observed Behaviours** only, these competencies are evidenced by the student self-assessing (ticking) the **OTCEM competency statements** they have achieved in the otca.net.au website, then by the student's Practice Educator (or academic or other relevant person where specified) verifying the student's self-assessment by agreeing or disagreeing with the student's self-assessed ticks on the students' OTCEM saved in "Your ePortfolio". This is **Observable Evidence**.

Once verified, all competency statements that your Practice Educator has agreed that you have achieved, will be automatically ticked-off against the relevant PRACSOT Performance Criteria/s at the corresponding level in "Your PRACSOT". You can see "Your PRACSOT Progress" in "Your ePortfolio" and via "Your Toolbar" on the OTCA website.

To maximise your learning and support your competency development, it is recommended you upload **Documented Evidence** – either one description or one piece of hard/documented evidence to "Your ePortfolio" for each self-assessed **OTPP step,** that best supports your self-assessment, to show your Practice Educator when they verify your self-assessed OTCEM.
Note: Documented Evidence may not be possible in some areas of practice - for example, if you are working on a long-term case such as with some older people, with people with intellectual disabilities or

with people with chronic problems, you would not go through all the steps of the OTPP. This will be evident with the practice placement description.

Check your university occupational therapy course guide for what Documented Evidence is required. This recommendation is to support students' competency development and is very fundamental for developing your ePortfolio to prove competence and for continued registration beyond graduation.

For example: The recommendation to University of Newcastle (UoN) students is to provide one description <u>or</u> one piece of hard/documented evidence for each self-assessed OTPP step. This is not part of the UoN students' course assessment. It is just to support students' competency development and is very fundamental for developing your ePortfolio to prove competence and for continued registration beyond graduation.

Students also should work towards providing a piece of holistic evidence that covers all or most of the OTPP steps they have selected and which is an outcome of their practice.
Academic work, including case studies / case stories / narratives of case stories / vivas and observation of clinical skills examinations (OCSEs) can be used for this evidence. Students' evidence is stored in their OTCA website ePortfolio: "Your ePortfolio". It is recommended you try to present or give this work to your Practice Educator and their team before you leave your placement to get their feedback. Often this work is presented back at the university (case studies, case stories, narratives of case stories and vivas).

FACT SHEET

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Clinical Placements and Privacy Responsibilities of Students

Student health professionals must sign a Privacy Undertaking and comply with privacy law and all NSW Health policies.

Once signed, students are bound by the same privacy restrictions that govern all health professionals. .

Clinical Placements and Students

Students may have access to health records if:
- that access is sought in respect of their clinical education program at the health facility, and
- Approval from the supervisor is obtained.

All information obtained must be under the direction of the supervisor.

Access does not include photocopying or transcribing records containing personal health information, or taking such records off site.

Clients/patients may refuse to have a student participate in their treatment.

Students cannot photocopy, scan, save to USB (or other similar device) or transcribe any element of the clinical record including photography and imaging.

The anonymity of clients/patients should be maintained during case presentations, research activities and university course work. Clinical information should always be de-identified and fictitious data should be used, where and when possible.

Use of photos and other visual aids which allow identification of individuals is not permitted unless the material is of critical importance and prior consent of the client/patient has been obtained.

Students cannot use or present patient information at any forum external to their education program. Forums such as national and state conferences are not allowed.

Further References

Privacy Manual (Version 2) - NSW Health PD2005_593

Health
Hunter New England
Local Health District
NSW GOVERNMENT

Client confidentiality is paramount. Any breach of the above may cause de-registration from the profession.

EXAMPLES OF EVIDENCE

Professional Work-related Documents:

In the light of the above information (NSW Health Fact Sheet) about your clinical placement privacy responsibilities, any professional work-related documents should NOT be copied or transcribed. This includes all the professional forms you have completed.

The way to evidence your developing competence is to self-assess (tick-off) the OTCEM competency statements then have them verified by your Practice Educator. This is Observable Evidence (Observed Behaviour).

It is also recommended you provide documented evidence - either one description or one piece of hard/documented evidence for each step to show your Practice Educator when they verify your OTCEM - as listed below.

Examples of hard/documented evidence for the OTPP steps:

- **Any Steps:** Records of supervision with your Practice Educator which can apply to separate OTPP steps.
- **Any Steps:** Items copied and pasted from your Blogs, Vlogs, electronic or handwritten diary entries/logs, emails to your lecturer or practice educator or other media

- **Any Steps:** Personal diary entries that you can choose to use as evidence

- **Any Steps:** Training and Development attendance with certified evidence of content

- **Any Steps:** Participation in research studies

- **Any Steps:** A description of an ethical incident.

- Steps 2, 6: Searches of the evidence base

- **Steps 3, 4, 5 or 6:** Technological media (which meets the content of the NSW Health Fact Sheet above), for example: links to YouTube clips/podcasts, images, small audio files (NB: written consent from any participants must be obtained and attached & you MUST NOT include any clients in any media)

- **Step 6:** Created documents for practice e.g. information booklets or directories

- **Step 6:** Products of group work

- **Step 6:** Application of literature

- **Step 7:** Client feedback

- **Step 7:** Report on Inter professional collaboration

- **Being A Professional:** Evidence of time management/~~diary scheduling~~ planner representative of general daily tasks

Examples of holistic documented evidence that you can create toward the end of your practice placement:

- Technical drawings with practice reasoning – can be used as part of narratives or reflection if they have been specially created/adapted and are not transcribed or copied versions of client records

- Project or development work

- Project planning

- Scrapbooking

- Posters

- Case studies

- Case stories

- Narratives

- Reflective papers

- Vivas

- Academic assignments/assessment items

- Report on Inter-professional collaboration

- Presentations

- Ethics application

Please note this list is not exhaustive – be creative

EMERGING COMPETENCE

Students at the **Emerging level** should demonstrate the application of client-centred practice and the principles of occupation in a practice context, meeting all professional standards (ethical, social, cultural, legal and moral). Case studies or narratives at this level should be straightforward and follow the whole Occupational Therapy Practice Process (OTPP). If the student's case study is from a practice placement where they are unable to report on their involvement at all steps of the OTPP, they should report clearly on any prior work completed by others as well as the student's proposed future actions.

Guidelines indicating the expectations for working at and evidencing holistically at the Emerging Level

Straightforward **Emerging** case studies / narratives are defined as:

- Being client-centred

- Being occupationally-orientated

- Being applicable to the service/setting

- Having no complicating factors (ethical, medical, social, psychological, cultural legal or occupational)

- Illustrating how a model of practice, frames of reference and evidence-based interventions are applied

- Following the Occupational Therapy Practice Process in a systematic manner.

CONSOLIDATING COMPETENCE

Students at the **Consolidating level** should demonstrate the application of client-centred practice the principles of occupation in a practice context meeting all professional standards (ethical, social, cultural, legal and moral). Holistic case studies or narratives at this level should have one complicating factor and follow the whole Occupational Therapy Practice Process. If the student's case study is from a practice placement where they are unable to report on their involvement at all steps of the Occupational Therapy Practice Process, they should report clearly on any prior work completed by others as well as the student's proposed future actions.

Guidelines indicating the expectations for working at and evidencing holistically at the Consolidating Level

Consolidating case studies/narratives are defined as:

- Being client-centred in all aspects of work

- Being occupationally-orientated in all aspects of work

- Being applicable to the service/setting

- Having one complicating factor (ethical, medical, social, psychological, cultural legal or occupational)

- Including evidence of the student's critical appraisal and application of the choice of model of practice, frames of reference and evidence based interventions

- Articulating how the student's practice reasoning has combined theoretical knowledge with experiential knowledge to inform case-based decision making

- Using the whole Occupational Therapy Practice Process, however some steps may need to be revisited and re-examined before the end of the placement

- Completing reflection and evaluation verifying that the student demonstrates insight into their strengths and challenges which impacted on their performance, and can evidence a plan of action to develop their practice for the next placement.

COMPETENT TO GRADUATE

Students at the **Competent to Graduate level** should demonstrate the application of client-centred practice the principles of occupation in practice context/s, meeting all professional standards (ethical, social, cultural, legal and moral). At this level it is more important to work holistically rather than at each individual step. Case studies or narratives at this level should have a range of complicating factors and follow the whole Occupational Therapy Practice Process. If the student's case study is from a practice placement where they are unable to report on their involvement at all steps of the Occupational Therapy Practice Process, they should report clearly on any prior work completed by others as well as the student's proposed future actions.

Guidelines indicating the expectations for working at and evidencing holistically at the Consolidating Level

This indicates the expectations for working at this level

Competent to Graduate holistic case studies/narratives are defined as:

- Being client-centred in all aspects of work

- Being occupationally-orientated in all aspects of work

- Being applicable to the service/setting

- Having a minimum of three complicating factors (ethical, medical, social, psychological, cultural legal or occupational)

- Including evidence of the student's critical appraisal and application of practice reasoning on the student's choice of model of practice, frames of reference and evidence-based interventions

- Articulating how the student's practice reasoning integrates and explores different possibilities, their risks, their outcomes and their relevance to client-centered practice, within the constraints of the service. Service or practice developments in the setting should be identified

- Using the whole Occupational Therapy Practice Process where some steps may need to revisited and re-examined before the end of the placement

- Completing reflection and evaluation verifying that the student demonstrates insight into their professional development, including insight into their strengths and challenges, a creative self-management plan of action and how the service to the client could be made more efficient and effective.